

## APPLICATION FOR REFUND

### WOOSLEY LITIGATION

<b>DMV USE ONLY</b> RECEIVED AND DESTROYED STICKER NO. HERE  <b>YEAR</b> _____
WARRANT NO. (ACCOUNTING USE ONLY): _____
DATE DMV RECEIVED REFUND REQUEST _____
BUSINESS INDICATOR: <input type="checkbox"/> B <input type="checkbox"/> I

#### APPLICANT INFORMATION

1. NAME (LAST, FIRST, MI)			
2. MAILING ADDRESS		3. CITY      STATE      ZIP	
4. VIN/HIN (LAST 3 CHARACTERS)	5. REFUND REGARDING (COMPLETE NAME)	6. LICENSE, ACCOUNT OR RECEIPT NO.	6a. <input type="checkbox"/> REGISTRATION <input type="checkbox"/> DRIVER <input type="checkbox"/> OCCUPATIONAL <input type="checkbox"/> MISC.
7. DATE FEES WERE PAID (MM/DD/YYYY)	8. OFFICE WHERE FEES WERE PAID	9. WERE FEES PAID BY CREDIT CARD? <input type="checkbox"/> Yes <input type="checkbox"/> No	10. AMOUNT OF CLAIM
11. A REFUND OF FEES IS BEING REQUESTED BECAUSE: <input type="checkbox"/> I am in the military and not a California resident. (Please attach completed and signed Certificate of Nonresident Military Exemption form). <input type="checkbox"/> Vehicle/vessel left California on _____ and fees were paid on _____. <div style="text-align: center; font-size: small;">DATE      DATE</div> <input type="checkbox"/> Vehicle/vessel last operated in California on _____ and fees were paid on _____. <div style="text-align: center; font-size: small;">DATE      DATE</div> <input type="checkbox"/> Vehicle/vessel was <input type="checkbox"/> sold <input type="checkbox"/> wrecked <input type="checkbox"/> stolen on _____ and fees were paid on _____. <div style="text-align: center; font-size: small;">DATE      DATE</div> <input type="checkbox"/> Other (please explain briefly).			

***I CERTIFY under penalty of perjury under the laws of the State of California that the foregoing is true and correct.***

12. DATE	13. SIGNATURE OF APPLICANT 	14. DAYTIME TELEPHONE NO. (      )
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#### FOR DMV USE ONLY

SUB M FEE CLEARANCE DATE				REPORTING UNIT NO.	TYPE LICENSE	TOTAL REFUND:	
FEE CODES + Waiver/County	REFUND AMOUNT	FEE CODES + Waiver/County	REFUND AMOUNT	FEE CODES + Waiver/County	REFUND AMOUNT	FEE CODES + Waiver/County	REFUND AMOUNT
A - (008)							
P - (031)							
T - (083)							
B - (084)							
Q - (085)							
S - (086)							
V - (087)							
001							
002							
003							
00L-							
VL2-							
FTB	VLF OFFSET	VLF PENALTY OFFSET	WAIVER CODE	DMV APPROVALS (LEGIBLE SIGNATURE REQUIRED)		DATE	
				 TECHNICIAN			
				 SUPERVISOR			
				 MANAGER			
REBATE	2001 AMT      PENALTY			2002 AMT      PENALTY			